CHALLENGER APPOINTMENT REQUEST FORM

SALEM COUNTY BOARD OF ELECTIONS 110 FIFTH STREET, SALEM NJ 08079 856-935-7510 FAX 856-935-6725

PLEASE PRINT CLEARLY AND RETURN BY OCTOBER 1, 2013 DEADLINE

MUNICIPALITY:				
PURSUANT TO N.J.S.A. 19:7-1 2, 3:				
I HEREBY REQUEST CHALLENGER A	APPOINTMENTS FOR THE	PARTY FOR TH	HE FOLLOWING CANDIDATE(S) IN	
THE 2013 SPECIAL GENERAL ELECTION:				
CANDIDATE(S)	NAME AND ADDRESS OF CH	ALLENGER	DISTRICT(S)	
Example: JOHN DOE (FREEHOLDER CANDIDATE)	MARY BROWN 124 MAI	N ST, ANYTOWN	1	
SIGNATURE: PRINT NAME:		CONTACT # OR EMAIL FO	ORTICA OF NOTICE:	

CANDIDATE(S)	NAME AND ADDRESS OF CHALLENG	GER DISTRICT(S)
SIGNATURE:	CONTACT	# OR EMAIL FOR PICK UP NOTICE:
PRINT NAME:		